

FINANCIAL AFFIDAVIT																	
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE																	
CJA 23 (Rev. 11/11) <div style="display: flex; justify-content: space-between; align-items: center;"> <div> IN THE UNITED STATES <input type="checkbox"/> DISTRICT COURT <input type="checkbox"/> COURT OF APPEALS <input type="checkbox"/> OTHER (Specify below) </div> <div style="border: 1px solid black; padding: 5px;">LOCATION NUMBER</div> </div>																	
IN THE CASE OF <u>US v. Franklin Reyes</u>		FOR _____ AT _____															
PERSON REPRESENTED (Show your full name) <u>Franklin Norberto Banista Reyes</u>		<div style="display: flex;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> Defendant - Adult <input type="checkbox"/> Defendant - Juvenile <input type="checkbox"/> Appellant <input type="checkbox"/> Probation Violator <input type="checkbox"/> Supervised Release Violator <input type="checkbox"/> Habeas Petitioner <input type="checkbox"/> 2255 Petitioner <input type="checkbox"/> Material Witness <input type="checkbox"/> Other (Specify) _____ </div> <div style="flex: 1; border: 1px solid black; padding: 5px;"> DOCKET NUMBERS Magistrate Judge _____ District Court _____ Court of Appeals _____ </div> </div>															
CHARGE/OFFENSE (describe if applicable & check box) <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <u>18 USC § 751(a)</u>																	
ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY																	
INCOME & ASSETS	EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Self-Employed Name and address of employer: <u>X construction</u> IF YES, how much do you earn per month? \$ <u>3000</u> IF NO, give month and year of last employment? _____ How much did you earn per month? \$ _____ If married, is your spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your spouse earn per month? \$ _____ If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____															
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <div style="display: flex; justify-content: space-between;"> <div> RECEIVED IF YES, give the amount received and identify the sources \$ _____ \$ _____ \$ _____ </div> <div> SOURCES _____ _____ _____ </div> </div>															
	CASH	Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, total amount? \$ _____															
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <div style="display: flex; justify-content: space-between;"> <div> IF YES, give value and description for each \$ _____ \$ _____ \$ _____ \$ _____ </div> <div> VALUE _____ _____ _____ _____ </div> <div> DESCRIPTION _____ _____ _____ _____ </div> </div>															
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated or Divorced Total No. of Dependents: _____ List persons you actually support and your relationship to them: _____ _____ _____															
	DEBTS & MONTHLY BILLS (Rent, utilities, loans, charge accounts, etc.)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">DESCRIPTION</th> <th style="width: 20%;">TOTAL DEBT</th> <th style="width: 20%;">MONTHLY PAYMENT</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>\$ _____</td> <td>\$ _____</td> </tr> </tbody> </table>		DESCRIPTION	TOTAL DEBT	MONTHLY PAYMENT	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____	_____	\$ _____	\$ _____	_____	\$ _____
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_____	\$ _____	\$ _____															
_____	\$ _____	\$ _____															
_____	\$ _____	\$ _____															
_____	\$ _____	\$ _____															

I certify under penalty of perjury that the foregoing is true and correct.

Franklin NBR
 SIGNATURE OF DEFENDANT
 (OR PERSON REPRESENTED)

6/17/2025
 Date